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APPLICANTS

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*KG*

\*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/017,958 12/14/2001 PAT 6,669,423

*My*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*Name*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>My</i>	Initials	

ADDRESS

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TITLE

Toolless thumb screw with adjustable height knob

FILING FEE  RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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